

United Nations Medical Directors: Recommendations for UN Personnel

Reducing the Risk of Acquiring Lassa Fever in Countries/Areas¹ known to be Endemic

- The following occupational health recommendations are provided by the UN Medical Directors to all Organizations and UN personnel to reduce the risk of UN personnel acquiring Lassa fever in countries/areas¹ known to be endemic for the disease.
- These recommendations should be applied to UN personnel travelling to or residing in countries/areas known to be endemic with Lassa fever.
- If this is a hard copy of the document, please be sure to check the <https://hr.un.org/page/travel-health-information> on the United Nations HR Portal for the latest version.
- Please contact msdpublichealth@un.org if you have any questions on this document.

References:

- WHO's Lassa fever webpage
- WHO's Lassa fever fact sheet

UN Personnel Risk Categories

UN Medical Directors Recommendations

1 UN personnel travelling to or residing in countries / areas known to be endemic for Lassa fever

- *[Notes on Lassa: Lassa fever is a viral illness that occurs in West Africa. The main reservoir of the Lassa virus is a rodent of the genus Mastomys known as the "multimammate rat". The virus is transmitted to humans mainly through exposure of food or household items contaminated by infected rats' urine and faeces and by handling infected Mastomys rats. The virus also spreads between humans through direct contact with the blood, urine, faeces, or other bodily secretions of an infected person. Person-to-person transmission occurs in both community and health-care settings, where the virus may be spread by contaminated medical equipment, such as re-used needles. Sexual transmission of Lassa virus has been reported. 80% of people infected will have no or mild symptoms. 1 in 5 people will develop a severe disease.]*

Ensure that you take all measures to protect against transmission of Lassa virus, including:

- Avoid all contact with rats (dead or alive), their urine, droppings and any soiled objects. Do not pick up any sick or dead rats.
- Avoid eating food or drinking water contaminated with the urine and/or faeces of rats.
- Avoid contact with rodent nests and burrows as these could contain Lassa virus infected rodent urine or faeces.

¹ According to WHO, Lassa fever is known to be endemic in Benin, Ghana, Guinea, Liberia, Mali, Sierra Leone, Togo and Nigeria, but probably exists in other West African countries as well (Reference: WHO fact sheet)

**1 UN personnel
travelling to or
residing in countries /
areas known to be
endemic for Lassa
fever (cont.)**

- Remove all sources of attraction for rats including storing food in rodent-proof containers (i.e. lid covered containers), properly disposing garbage, and keeping your house clean, including washing dishes after eating, to prevent rodent infestation. Prevent rats from entering home by blocking holes around house, improving building materials and structures, and keeping cats and dogs.
- Wash your hands frequently and thoroughly with soap and water. If not available, use an alcohol-based sanitizer.
- If caring for sick individuals who are suspected or confirmed to have Lassa fever, family members must take great care to avoid contact with blood and body fluids. Use gloves and protected gowns to assist sick members who are vomiting or having diarrhoea. All soiled clothes should be immersed in a bleach solution (1-part bleach and 10-parts water) for 30 minutes before washing.
- Always follow safer sex practices.
- During or after travel to countries/areas known to be endemic for Lassa, you should be alert for symptoms of the disease, including fever and chills, sore throat, general weakness, headache, fatigue, malaise, muscle pain, chest pain, nausea, vomiting, diarrhoea, abdominal pain and bleeding. If you have any suspicion or if you are feeling ill, seek medical advice immediately and remember to inform your medical practitioner about your recent travel to a Lassa-affected country/area.

2 UN personnel who has been exposed to infected rats or had close contact with suspect / confirmed Lassa fever patients

- If you have had contact with infected rats or have had close contact (including blood-blood contact, or with other body fluids) with persons infected with Lassa fever, you should immediately notify and seek advice from your medical practitioner, UN physician or your Organisation's Medical Services to assess your personal risk and evaluate the need for any treatment.
- Persons with such exposure should also be monitored daily for symptoms for 21 days counting from the last day of exposure. They should also receive advice about appropriate measures they can take to protect themselves and their families from Lassa fever.
- If symptomatic, your doctor may choose to provide you with the antiviral drug ribavirin, which can be effective for Lassa fever if given early on in the course of clinical illness.

<p>3 UN health care workers (including doctors, nurses, hospital cleaning staff, lab workers..etc) in close contact with or clinically managing suspected or confirmed Lassa fever patients or their lab samples</p>	<ul style="list-style-type: none"> • All health care workers should always practice universal standard care precautions (see Standard Precautions in Health Care when caring for patients, regardless of their presumed diagnosis. This includes hand hygiene, respiratory hygiene, use of personal protective equipment (to block splashes or other contact with infected materials), safe injection practices and safe burial practices. • Health care workers caring for patients with suspect/confirmed Lassa fever should always apply extra infection control measures to prevent contact with the patient's blood, body fluids and contaminated surfaces/materials such as clothing and bedding (see Infection Prevention and Control Guidance for Care of Patients in Health-Care Settings, with Focus on Ebola) When in close contact (within 1 metre) of infected patients, health care workers should wear face protection (a face shield or a medical mask and goggles), a clean, non-sterile long-sleeved gown, and gloves (sterile gloves for some procedures). • Health care workers should maintain a high index of suspicion for Lassa fever in febrile patients returning from West Africa, especially if they have had exposures to rats in rural areas or visited hospitals in countries where Lassa fever is known to be endemic. • Health-care workers seeing a patient suspected to have Lassa fever should immediately isolate the patient, and contact local and national disease focal points for advice and to arrange for laboratory testing. • For laboratory workers, lab specimens may be hazardous and must be handled with extreme care. Samples taken from humans and animals for Lassa virus investigation should be handled only by trained staff and processed in a suitably equipped laboratory under maximum biological containment conditions.
<p>4 Any UN personnel involved in environmental and vector control</p>	<ul style="list-style-type: none"> • Assess risk and use appropriate precautionary measures according to national guidance, as Lassa fever can be acquired from handling infected rodents/rats or their remains.